

General Assembly

Raised Bill No. 884

January Session, 2013

LCO No. 3199



Referred to Committee on AGING

Introduced by: (AGE)

AN ACT INCREASING ELIGIBILITY FOR HOME AND COMMUNITY-BASED CARE FOR ELDERLY PERSONS AND THOSE WITH ALZHEIMER'S DISEASE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Subdivision (1) of subsection (c) of section 17b-349e of the
- 2 general statutes is repealed and the following is substituted in lieu
- 3 thereof (*Effective July 1, 2013*):
- 4 (c) (1) No individual with Alzheimer's disease may participate in the
- 5 program if such individual (A) has an annual income of more than
- 6 [forty-one] fifty thousand dollars or liquid assets of more than [one
- 7 hundred nine] one hundred eleven thousand dollars, or (B) is receiving
- 8 services under the Connecticut home-care program for the elderly. On
- 9 July 1, [2009] 2014, and annually thereafter, the commissioner shall
- 10 increase such income and asset eligibility criteria over that of the
- 11 previous fiscal year to reflect the annual cost of living adjustment in
- 12 Social Security income, if any.
- 13 Sec. 2. Subsection (i) of section 17b-342 of the general statutes is
- 14 repealed and the following is substituted in lieu thereof (Effective July

15 1, 2013):

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(i) (1) On and after July 1, 1992, the Commissioner of Social Services shall, within available appropriations, administer a state-funded portion of the program for persons (A) who are sixty-five years of age and older; (B) who are inappropriately institutionalized or at risk of inappropriate institutionalization; (C) whose income is less than or equal to the amount allowed under subdivision (3) of subsection (a) of this section; and (D) whose assets, [if single, do not exceed the minimum community spouse protected amount pursuant to Section 4022.05 of the department's uniform policy manual or, if married, the couple's assets do not exceed one hundred fifty per cent of said community spouse protected amount and on and after April 1, 2007, whose assets, if single, do not exceed one hundred fifty per cent of the minimum community spouse protected amount pursuant to Section 4022.05 of the department's uniform policy manual or, if married, the couple's assets do not exceed two hundred per cent of said community spouse protected amount] on and after July 1, 2013, if single, do not exceed forty thousand dollars or, if married, do not exceed sixty-five thousand dollars.

(2) Except for persons residing in affordable housing under the assisted living demonstration project established pursuant to section 17b-347e, as provided in subdivision (3) of this subsection, any person whose income is at or below two hundred per cent of the federal poverty level and who is ineligible for Medicaid shall contribute [seven] six per cent of the cost of his or her care. Any person whose income exceeds two hundred per cent of the federal poverty level shall contribute [seven] six per cent of the cost of his or her care in addition to the amount of applied income determined in accordance with the methodology established by the Department of Social Services for recipients of medical assistance. Any person who does not contribute to the cost of care in accordance with this subdivision shall be ineligible to receive services under this subsection. Notwithstanding any provision of the general statutes, the department shall not be

required to provide an administrative hearing to a person found ineligible for services under this subsection because of a failure to contribute to the cost of care.

- (3) Any person who resides in affordable housing under the assisted living demonstration project established pursuant to section 17b-347e and whose income is at or below two hundred per cent of the federal poverty level, shall not be required to contribute to the cost of care. Any person who resides in affordable housing under the assisted living demonstration project established pursuant to section 17b-347e and whose income exceeds two hundred per cent of the federal poverty level, shall contribute to the applied income amount determined in accordance with the methodology established by the Department of Social Services for recipients of medical assistance. Any person whose income exceeds two hundred per cent of the federal poverty level and who does not contribute to the cost of care in accordance with this subdivision shall be ineligible to receive services under this subsection. Notwithstanding any provision of the general statutes, the department shall not be required to provide an administrative hearing to a person found ineligible for services under this subsection because of a failure to contribute to the cost of care.
- (4) The annualized cost of services provided to an individual under the state-funded portion of the program shall not exceed fifty per cent of the weighted average cost of care in nursing homes in the state, except an individual who received services costing in excess of such amount under the Department of Social Services in the fiscal year ending June 30, 1992, may continue to receive such services, provided the annualized cost of such services does not exceed eighty per cent of the weighted average cost of such nursing home care. The commissioner may allow the cost of services provided to an individual to exceed the maximum cost established pursuant to this subdivision in a case of extreme hardship, as determined by the commissioner, provided in no case shall such cost exceed that of the weighted cost of such nursing home care.

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This act shall sections:	ll take effect as follo	ows and shall amend the following
Section 1	July 1, 2013	17b-349e(c)(1)
Sec. 2	July 1, 2013	17b-342(i)

AGE Joint Favorable C/R

APP